

# EXPEDITED RFQ NOTIFICATION SHEET

## Office of Contracts and Rate Setting

State of Michigan

Department of Human Services

Notice of a request for quotations or a request for proposal is hereby given Pursuant to Act No. 124 of the Public Acts of 1999.

Amount: <b>\$48,000.00 (\$16,000.00 per year)3 Year Term</b>	ITB Number <b>DHS ES 09-37001</b>
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**Bid Description:**

**Isabella County Department of Human Services: Emergency Services Contract**

**Contract Term:**

**10/1/08-9/30/11**

**Services Requested:**

- 1.) Emergency Shelter-(Hotel/ Motel)**
- 2.) Homeless Prevention**
- 3.) Homeless Transition**
- 4.) Emergency Transportation**

**Selection Criteria:**

- Established and experienced provider within Isabella County Michigan.**
- Accessible facility.**
- Certified and licensed staff and facility.**

**Bids shall not exceed former fair market rates.**

**No RFQ is attached. This is a small dollar contract. Contact the staff listed below for details.**

**Due Date for Response:**

**7/18/08**

**Contact Person Name:**

**Bob Lewis**

**Phone #:**

**(989) 772-8445**

**E-Mail Address:**

**Lewisb3@michigan.gov**